



**2016-2017 Membership Form (all field required)**

First name: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Last name: \_\_\_\_\_

Home phone: \_\_\_\_\_

Address: \_\_\_\_\_

Work phone: \_\_\_\_\_

City: \_\_\_\_\_

Cell phone: \_\_\_\_\_

State: \_\_\_\_\_

Email: \_\_\_\_\_

OCA-DC Membership Dues Categories (select one):

- \$10 Youth/Student (up to full-time undergraduate)
- \$20 Senior Citizens (65 years and older)
- \$40 Individual (one year)
- \$70 Individual (two years)
- \$140 Individual (five years)
- \$1000 Individual Lifetime
- \$50 Family (one year, 2 adults and up to 2 children under 18 years old)
- \$90 Family (2 years, 2 adults and up to 2 children under 18 years old)
- \$180 Family (5 years, 2 adults and up to 2 children under 18 years old)
- \$1500 Family Lifetime (2 adults and up to 2 children who age out after 18)

Please make your check payable to OCA-DC and return this form to:

OCA-DC  
Attn: Membership  
P.O. Box 10433  
Rockville, MD 20850

*Please email Lin Krause, VP of Membership, at [membership@ocadc.org](mailto:membership@ocadc.org) if you have any questions.  
Thank you for joining OCA-DC or renewing your membership!  
Visit our website <http://www.ocadc.org>*